		S	RF Disbursement Request Form						
Participant Information									
Name:	City of West Lat	fayette	tte			WW 12792206			
DUNS Number:	04 455 26	04 455 2636 CCR Number: 6NKJ2		Request Number:		30			
Mailing Address:	609 West Na	vajo Street							
City:	West Lafayette State: IN Zip Code: 47906								
Contact Person: Judith C. Rhodes, Clerk-Treasurer Contact Phone Number:					nber: (765)	(765) 775-5150			
Authorized Representative: Mayor John R. Dennis, or Clerk-Treas. Judith C. Rhodes Auth. Rep. Phone Number					umber (765)	(765) 775-5100			
If requesting reimbur	sement to the Participa	nt by wire transfer, please p	provide the following information:						
Bank Name: Bank Routing Number:					er:				
Account Name: Account Number:									
Loan Information	100 E								
Description of work for fees, type of work), e	or which claim is being into:	made (services, North	nside Regional Lift Station and Force N	<i>f</i> lain					
Is any part of this cla	im funded by an alterna	ate funding source?					YES 2	ON [
If yes, please	identify the source and	d amount of the claim funde	ed by the alternate source (OCRA, SAP, Local	Funds) :					
Source:			Amount:		\$0				
ls any part of this cla	im funded by the Indian	a Brownfield's Program?					YES 🖸	ON [
Has the Participant p	aid the request and is r	now seeking reimbursemen	nt?				YES 2	ON [
Is any part of this claim a result of a change order? If yes, please attach the SRF change order approval letter.							YES 2	ON [
Are there Green Project Reserve components involved in this request?							YES 2	NO NO	
If yes, please describe:									
Loan Financial In	formation	$\lim_{t\to\infty} x^{-1} = \mathcal{G}_{t}^{-1}(x^{-1})$					a diservi		
Original Loan Am	ount:						\$4,2	200,000	
Total Amount of P	revious Disbursem	ents:					\$2,	586,498	
Balance Available	After this Disburse	ment:				\$1,603,590			
Amount to Contra	ctor for this Reques	sit:						\$9,912	
Is any part of this req	uest a partial or final re	lease of retainage to the co	ontractor?				YES 🖸	ON D	
Contractor Name:	Greeley & Hanse	en		DUNS Number:	04 56	04 569 9949			
Mailing Address:	Lockbox 619	776, PO Box 6197							
City:	Chicago	State:	IL	Zip: 60 6	80-6197				
Wiring Information:								,	
Bank Name:				Bank Routing Numb	er:				
Account Name:				Account Number:					
Retainage Amount for this Request:								\$0	
Please select one of	the following retainage	payment options:							
Participant requests that the retainage amount be held by SRF:									
Participant requests that the retainage amount be sent to the Participant via check to the mailing address listed.									
Participant requests that the retainage amount be sent to the following bank:]	
Bank Name:				Bank Routing:					
Account Name:				Account Number:					
Total Amount of This Request:								\$9,912	
The undersigned hereby certifies that this Request is true and correct, that the claim underlying this Request is legally due (and is payable from SRF) in accordance with the Participant's Financial Assistance Agreement with the Authority.									
Authorized Representative Signature: Date:					:		21	-Jan-14	
					•				
FOR INTERNAL USE	ONLY:					941772	4414		

Date

Approved by

GPR Amt:



100 S. Wacker Drive, Suite 1400 Chicago, Illinois 60606 p 312 558 9000 f 312 558 1986 www.greeley-hansen.com

December 23, 2013

Mr. David Henderson Utility Director City of West Lafayette Wastewater Treatment Utility 500 South River Road West Lafayette, IN 47906

JAN 1 3 2014 UTILITY DIRECTOR

Subject:

North Side Regional Lift Station and Force Main

Invoice No. 393432

Dear David:

The enclosed invoice is for services related to the North Side Regional Lift Station and Force Main project in accordance with the agreement dated September 28, 2009. Invoice No. 393432 covers services provided from November 9, 2013 through December 13, 2013 including:

- Review of the following RFI's:
 - o RFI 025 Gas Line through Wall
 - o RFI 026 Outdoor Lighting
 - o RFI 027 Lid Rebar Tails
- Review of the following Submittals:
 - o 15500-001 Electric Unit Heaters
 - o 10210-001 Metal Louvers
 - o 15501-001 Exhaust Fans
 - o 10522-001 Fire Ext.
 - o 04200-001R2 Ext. Stone Cladding
 - 03600-001 NS Grout PD
 - o 03600-003 NS Grout PD
 - o 15446-001R3 Sump Pump/Control Panel PD & SD
 - o 07530-001R2 Membrane Roofing
 - o 10431-002 Project Sign
- Prepared Meeting Agenda & Conducted December 11th Progress Meeting
- Continued coordination with RL Turner, PRF and City.

Please call me if you have any questions.

Thank you.

Sincerely,

Greeley and Hansen

Joseph M. Teusch Jmt/img

INVOICE

For customer service, call 312 578 2375.



Celebrating 100 YEARS: Quality · Vision · Future

P.O. Box 6197 Chicago, Illinois 60680-6197 p 312 558 9000 www.greeley-hansen.com

Billing Number:

Invoice Number:

INV-0000393432

Description:

NORTH SIDE REGIONAL LIFT STATION AND FORCE MAINS

CITY OF WEST LAFAYETTE

ATTN: MR. DAVID HENDERSON UTILITY DIRECTOR 500 SOUTH RIVER ROAD WEST LAFAYETTE, IN 47906

Customer Number.

0791

Project Number:

Project Name:

Terms: Due Date: 0791C.01

NORTH SIDE REGIONAL LS&FM

01/22/14

DL w/multiplier 3.2 Total Labor

Architectural Servs Sub-Consultants Travel Printing Total ODC's

Mark-up on ODC's Mark-up Subtotal

Invoice Total

Current Incurred Hours:

Invoice Date:

12/23/13

Remit To: GREELEY AND HANSEN

LBX 619776 P.O. Box 6197 CHICAGO, 60680-6197

USA

Contract Value

Cost: Fee: Total: \$869,600.00 \$0.00 \$869,600.00

Cumulative Amount Billed:

\$829,533.81

Billing Period From:11/09/13 To:12/13/13

Current
Amount
\$9,911.58
\$9,911.58
\$0.00
0.00
0.00
0.00
\$0.00
\$0.00
\$0.00
\$9,911.58

Cumulative Amount \$653,402.94 \$653,402.94 \$68,297.26 101,488.14 826.47 507.44 \$171,119.31

> \$5,011.56 \$5,011.56

\$829,533.81



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P.O. Box 6197 Chicago, Illinois 60680-6197 p 312 558 9000 www.greeley-hansen.com

	38 INV-0000393432	Project Number: Project Name:	0791C.01 NORTH SIDE REGIONAL LS&FM	Invoice Date:	12/23/13			
Non-T&M Labor Supporting Schedule								
Group Description:	Total Labor							
Labor Cat Desc	Empl/Vendor		rrent ours	Current Amount				
OF ON AL CANUTADY TEL	LICOLI IOCEDILIM		0.00	0.400.00				

	T/S	Current	Current
Empl/Vendor	Date	Hours	Amount
TEUSCH, JOSEPH M		3.00	\$166.38
HARDY, JEREMY D		52.50	1,929.90
HEALY, TIMOTHY S		4.50	182.43
		16.00	643.52
WOLAK, SLAWOMIR		3.00	175.14
		79.00	\$3,097.37
		79.00	\$3,097.37
	TEUSCH, JOSEPH M HARDY, JEREMY D HEALY, TIMOTHY S KROENUNG, JEFFREY C	TEUSCH, JOSEPH M HARDY, JEREMY D HEALY, TIMOTHY S KROENUNG, JEFFREY C	Empl/Vendor Date Hours TEUSCH, JOSEPH M 3.00 HARDY, JEREMY D 52.50 HEALY, TIMOTHY S 4.50 KROENUNG, JEFFREY C 16.00 C WOLAK, SLAWOMIR 3.00 79.00 79.00

INV-0000393432 0791C.01

DATE	HARDY	HEALY KR	OENUNG	TEUSCH	WOLAK	Grand Total
11/11/13	4.00		1.00		3.00	8.00
11/12/13	3.25		1.50			4.75
11/13/13	4.25		1.00			5.25
11/14/13	6.00		3.00			9.00
11/15/13	3.50					3.50
11/18/13	3.00					3.00
11/19/13	7.50					7.50
11/20/13	4.00	0.00				4.00
11/22/13	2.50	1.50	1.00			5.00
11/25/13	4.00	1.00	2.50			7.50
11/26/13	3.00			2.00		5.00
11/27/13	1.00	2.00	2.50	1.00		6.50
12/02/13	2.00		2.00			4.00
12/03/13	1.00					1.00
12/04/13	2.00		0.50			2.50
12/05/13	1.50		1.00			2.50
Grand Total	52.50	4.50	16.00	3.00	3.00	79.00